



Dkt. 0575/62097/JPW/AJM/JCS

#14/c  
S-15-03  
(P)

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicants : David M. Stern et al.  
Serial No. : 09/638,648 Group Art Unit: 1632  
Filed : August 14, 2000 Examiner: Thaian N. Tom  
For: : A METHOD TO INCREASE CEREBRAL BLOOD FLOW IN  
AMYLOID ANGIOPATHY

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1185 Avenue of the Americas  
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May 12, 2003

Commissioner for Patents  
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**AMENDMENT IN RESPONSE TO  
FEBRUARY 12, 2003 FINAL OFFICE ACTION**

This Amendment is submitted in response to a February 12, 2003 Final Office Action issued by the United States Patent and Trademark Office in connection with the above-identified application. A response to the February 12, 2003 Final Office Action is due May 12, 2003. Accordingly, this Amendment is being timely filed.

Please amend the subject application as follows:

In the claims:

Please amend claim 1 as follows:



AF 1600

Docket No. 0575/62097/JPW/AJM/JCS

In re application of: David M. Stern et al.

Serial No.: 09/638,648

Examiner: Thaian N. Tom

Filed: August 14, 2000

Group Art Unit: 1632

For: A METHOD TO INCREASE CEREBRAL BLOOD FLOW IN AMYLOID ANGIOPATHY

COMMISSIONER FOR PATENTS  
P.O. Box 1450  
Alexandria, VA 22313-1450

May 12, 2003

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S I R:

Transmitted herewith is an amendment after final to the above-identified applications.

Small entity status of this application under 37 C.F.R. § 1.27 has been established by a verified statement previously submitted.

a verified statement to establish small entity status under 37 C.F.R. § 1.27 is enclosed.

No additional fee is required, other than the enclosed \$200.00 fee for the two-month extension of time.

The filing fee is calculated as follows:

	NUMBER AFTER AMEND- MENT		HIGHEST NUMBER PREVIOUSLY PAID FOR		NUMBER OF EXTRA CLAIMS PRESENTED		RATE		FEE	
							SMALL ENTITY	OTHER ENTITY	SMALL ENTITY	OTHER ENTITY
Total Claims	16	-	16	=	0	X	9	18	=	0
Indepen- dent Claims	3	-	3	=	0	X	42	84	=	0
Multiple Dependent Claim(s) Presented _____ Yes _____ X _____ No For First Time:							140	280		0
							TOTAL ADDITIONAL FEE \$ 0			

\* If the "HIGHEST NUMBER PREVIOUSLY PAID FOR" is less than 20, write "20" in this space.

\*\* If the "HIGHEST NUMBER PREVIOUSLY PAID FOR" is less than 3, write "3" in this space.

\*\*\* If the difference between the "NUMBER AFTER AMENDMENT" and the "HIGHEST NUMBER PREVIOUSLY PAID FOR" is less than "0", write "0" in the space.

David M. Stern, et al.  
Serial No.: 09/638,648  
Filed: August 14, 2000  
Amendment Transmittal Letter  
Page 2

The "HIGHEST NUMBER PREVIOUSLY PAID FOR" (Total or Independent) is the highest of the "NUMBER AFTER AMENDMENT" in any prior amendment of the number of claims as originally filed.

\_\_\_\_\_ Please charge Deposit Account No. \_\_\_\_\_  
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\_\_\_\_\_ A check in the amount of \$ \_\_\_\_\_ is enclosed.

X The Commissioner is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 03-3125. Three Copies of this sheet are enclosed.

X Any filing fees under 37 C.F.R. §1.16 for the presentation of extra claims.

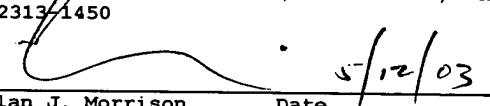
X Any patent application processing fees under 37 C.F.R. §1.17.

Respectfully submitted,



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I hereby certify that this correspondence is being deposited this date with the U.S. Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450

  
Alan J. Morrison Date 5/12/03  
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